This Instrument Prepared By:
ANNA G. EVERTON, Esq. • 4525 Harding Road, Suite 323 • PO Box 58084 • Nashville, TN 37205-8084

This deed was prepared without the benefit of a title search and the description of the property was furnished by the parties. The preparer of this deed assumes no liability whatsoever either for the accuracy of the legal description or the status of the title to the property.

Address New Owner:	***Send Tax Bills To:***	***Map-Parcel***
HORACE WAYNE COGGINS TERRY EUGENE COGGINS ROY DALE COGGINS 1560 Celebration Way Nashville, TN 37211	Same	Tract One: 082-09-0 179.00 Tract Two: 082-09-0 180.00

AFFIDAVIT OF INHERITANCE

Davidson County AFFIDAVIT
Recvd: 03/16/05 08:28 6 pg
Fees:32.00 Taxes:0.00
20050316-0028637

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

The undersigned, HORACE WAYNE COGGINS, TERRY EUGENE COGGINS, AND ROY DALE COGGINS, each being duly sworn, depose and say:

EDITH CHRISTINE COGGINS, a resident of Davidson County, State of Tennessee, who died October 21, 2003, as evidenced by a copy of the death certificate attached as Exhibit A, held a fee simple interest in the following described two tracts of real estate:

TRACT ONE: (Map-Parcel 82-9-179.00)

Land in Davidson County, Tennessee, being the South 30 feet of the North 33-1/3 feet of Lot No. 57 in D.T. McGavock's Subdivision, of record in Book 10, pages 606, 608 and 609, Register's Office for said County.

Being the same property conveyed to WILLIAM LEROY COGGINS, JR., AND WIFE, EDITH CHRISTINE COGGINS, by deed from Samuel L. Wall and wife, Virdie E. Wall, of record in Book 1422, Page 37, Register's Office for Davidson County, Tennessee, the said WILLIAM LEROY COGGINS, JR. having predeceased his wife.

This is improved property known as 1325 4th Ave. N., Nashville, TN

TRACT TWO: (Map-Parcel 82-9-180.00)

Land in Davidson County, Tennessee.

Being the northerly 3.5 feet of the easterly part of Lot No. 57 and the southerly 29.4 feet on the easterly part of Lot No. 58 on the Plan of D.T. McGavock's First Addition of record in Book 10, page 606 to 609, inclusive, Register's Office for said County.

Being the same property conveyed to WILLIAM L. COGGINS, JR. AND WIFE, EDITH C. COGGINS of record in Book 5250, page 152, Register's Office for Davidson County, Tennessee, the said WILLIAM L. COGGINS, JR. being one and the same as WILLIAM LEROY COGGINS, who predeceased his wife. EDITH C. COGGINS is one and the same person as EDITH CHRISTINE COGGINS.

This is improved property known as 1327 4th Ave. N., Nashville, TN

SUBJECT TO Governmental zoning and subdivision ordinances or regulations in effect thereon.

Each of the undersigned received a 1/3 (one-third) tenancy-in-common interest in the real estate described above by virtue of the laws of descent and distribution, being the three only heirs at law.

A Tennessee Inheritance Tax Waiver for each tract has been received ~~being number~~ _____, a copy of which is attached as Exhibit B.

There are no debts or encumbrances remaining that are or might become a lien on the interest in the described real estate.

TCA § 67-4-409(a)(3)(D) exempts this instrument from tax and TCA § 67-4-409(a)(5) further provides the valuation oath is unnecessary, the affidavit being used to evidence transfer of title to the property to beneficiaries.

HORACE WAYNE COGGINS

TERRY EUGENE COGGINS

ROY DALE COGGINS

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared HORACE WAYNE COGGINS, the within named bargainor, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that HORACE WAYNE COGGINS executed the foregoing instrument for the purposes therein contained as HORACE WAYNE COGGINS' free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at my office in said County, on this 15 day of January, 2005.

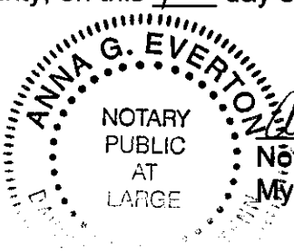
ANNA G. EVERTON NOTARY PUBLIC AT LARGE DAVIDSON COUNTY, TENN.

Anna G. Everton
Notary Public
My Commission Expires: 7/21/2007

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared TERRY EUGENE COGGINS, the within named bargainor, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that TERRY EUGENE COGGINS executed the foregoing

instrument for the purposes therein contained as TERRY EUGENE COGGINS' free act and deed.

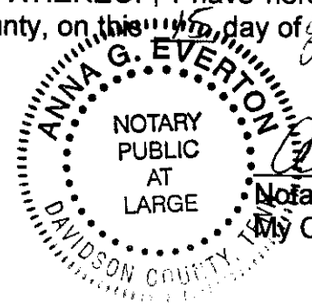
IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at my office in said County, on this 15 day of January, 2005.



Anna G. Everton
Notary Public
My Commission Expires: 7/21/2007

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared ROY DALE COGGINS, the within named bargainor, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that ROY DALE COGGINS executed the foregoing instrument for the purposes therein contained as ROY DALE COGGINS' free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at my office in said County, on this 15 day of January, 2005.



Anna G. Everton
Notary Public
My Commission Expires: 7/21/2007

METROPOLITAN GOVERNMENT OF NASHVILLE & DAVIDSON COUNTY
Office of Vital Records

EX. A

0306160

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): Edith Christine Coggins
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): October 21, 2003
4. SOCIAL SECURITY NUMBER: [redacted]9882
5a. AGE-LAST BIRTHDAY (Years): 77
5b. UNDER 1 YEAR: MOS. / DAYS
5c. UNDER 1 DAY: HOURS / MIN.
6. DATE OF BIRTH (Month, Day, Year): January 5,1926
7. BIRTHPLACE (City and State or Foreign Country): Nashville, TN
8. HAS DECEDENT EVER IN U.S. ARMED FORCES? 1 [ ] Yes 2 [X] No
9a. PLACE OF DEATH (Check only one): HOSPITAL: 1 [X] Inpatient 2 [ ] ER/Outpatient 3 [ ] DOA; OTHER: 4 [ ] Nursing Home 5 [ ] Residence 6 [ ] Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): Baptist Hospital
9c. CITY, TOWN, OR LOCATION OF DEATH: Nashville
9d. COUNTY OF DEATH: Davidson
10. MARITAL STATUS-Married, Never Married, Widowed, Divorced (Specify): Widowed
11. SURVIVING SPOUSE (If wife, give maiden name):
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): Homemaker
12b. KIND OF BUSINESS/INDUSTRY: Domestic
13a. RESIDENCE-STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 1325 4th Ave. North
CENSUS TRACT
13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No
13f. ZIP CODE: 37208
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No-If yes, specify Cuban, Mexican, Puerto Rican, etc.) [ ] Yes [X] No. Specify, if yes:
15. RACE-American Indian, Black, White, etc. (Specify): White
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): 8; College (1-4 or 5+):

NAME OF DECEDENT: For use by physician or medical examiner

PARENTS

17. FATHER'S NAME (First, Middle, Last): Jesse Albert Downs
18. MOTHER'S NAME (First, Middle, Maiden Surname): Venie Beatrice Green

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Wayne Coggins
19b. RELATIONSHIP TO DECEASED: Son
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 5510 Country Drive #92 Nashville, TN 37211

DISPOSITION

20a. METHOD OF DISPOSITION: 1 [X] Burial 2 [ ] Cremation 3 [ ] Removal from State 4 [ ] Donation 5 [ ] Other (Specify)
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Spring Hill Cemetery
20c. LOCATION-City or Town, State: Nashville, TN
21a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Rick Smith
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 5194
21c. SIGNATURE OF EMBALMER: ▶ Rick Smith
21d. LICENSE NUMBER OF EMBALMER: 5195
22a. NAME AND ADDRESS OF FUNERAL HOME: Spring Hill 5110 Gallatin Rd. Nashville, TN 37216
22b. LICENSE NUMBER OF FUNERAL HOME: 1046

REGISTRAR

23. REGISTRAR'S SIGNATURE: ▶ M. Ken A. Brown
24. DATE FILED (Month, Day, Year): November 3, 2003

CERTIFIER

25a. PHYSICIAN - To the best of my knowledge, death occurred at the date and place, and due to the cause(s) and manner as stated.
1 [ ] SIGNATURE AND TITLE OF PHYSICIAN: ▶ [illegible] M.D.
25b. LICENSE NUMBER: MD 24660
25c. DATE SIGNED (Month, Day, Year): 10/29/03
26a. MEDICAL EXAMINER - On the basis of examination and/or investigation, in my opinion, death occurred at the date and place, and due to the cause(s) and manner as stated.
2 [ ] SIGNATURE AND TITLE OF MEDICAL EXAMINER: ▶
26b. LICENSE NUMBER:
26c. DATE SIGNED (Month, Day, Year):

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CERTIFICATE MUST COMPLETE AND SIGN MEDICAL CERTIFICATION WITHIN 48 HOURS

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print):

SEE INSTRUCTIONS ON OTHER SIDE

CAUSE OF DEATH

28. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. (Approximate Interval Between Onset and Death)

IMMEDIATE CAUSE (Final disease or condition resulting in death):
a. Cerebral Vascular Accident
DUE TO (OR AS A CONSEQUENCE OF):
b. Arterio Sclerosis
DUE TO (OR AS A CONSEQUENCE OF):
c.
DUE TO (OR AS A CONSEQUENCE OF):
d.

Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.

29a. WAS AN AUTOPSY PERFORMED? 1 [ ] Yes 2 [X] No
29b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 1 [ ] Yes 2 [ ] No

30. MANNER OF DEATH: 1 [ ] Natural 2 [ ] Accident 3 [ ] Suicide 4 [ ] Homicide 5 [ ] Pending Investigation 6 [ ] Could not be Determined
31a. DATE OF INJURY (Month, Day, Year):
31b. TIME OF INJURY:
31c. INJURY AT WORK? 1 [ ] Yes 2 [ ] No
31d. DESCRIBE HOW INJURY OCCURRED:
31e. PLACE OF INJURY-At home, farm, street, factory, office building, etc. (Specify):
31f. LOCATION (Street and Number or Rural Route Number, City or Town, State)

PH-1659 (REV. 6/99)
BIRTH NO.
RDA 1399

I hereby certify the above to be a true and correct copy of the original document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Metropolitan Government of Nashville and Davidson County. Alteration or erasure voids this certification.

Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977.

Tonya Y. Ruttlen
Tonya Y. Ruttlen
Local Registrar

NOV 13 2003
Date Issued

GREAT SEAL OF THE STATE OF TENNESSEE XVI AGRICULTURE COMMERCE 1796

METROPOLITAN GOVERNMENT NASHVILLE AND DAVIDSON COUNTY TENNESSEE

CERTIFICATION OF VITAL RECORD

Ex. B
(Tract One)

TENNESSEE DEPARTMENT OF REVENUE

INHERITANCE TAX RELEASE
FOR REAL OR PERSONAL PROPERTY

NOTICE: THIS DOCUMENT BECOMES AN OFFICIAL STATE RECORD WHEN COMPLETED. INFORMATION SHOULD BE TYPED OR PRINTED CLEARLY IN INK. COMPLETE A SEPARATE INHERITANCE TAX RELEASE FORM FOR EACH PARCEL OF REAL PROPERTY OR FOR EACH BANK OR CORPORATION.

NAME OF DECEDENT: EDITH CHRISTINE COGGINS

COUNTY OF RESIDENCE: DAVIDSON

SOCIAL SECURITY NUMBER: [redacted]-9882

RECEIVED
12
JAN 18 '05
TENNESSEE DEPT. OF REVENUE

APPLICATION:

ATTACHED: YES ✓ NO ___

ON FILE: YES ___ NO ___ IF SO DATE FILED ___

The Department of Revenue hereby waives the issuance of notice required by Section 67-8-417, Tennessee Code Annotated and consents to the transfer of the property now in your custody, or standing on your records in the name of the captioned decedent.

DESCRIPTION OF PROPERTY:
(List only one)

(Davidson County Map-Parcel 82-9-179.00)

Land in Davidson County, Tennessee, being the South 30 feet of the North 33-1/3 feet of Lot No. 57 in D.T. McGavock's Subdivision, of record in Book 10, pages 606, 608 and 609, Register's Office for said County.

This is improved property known as 1325 4th Ave. N., Nashville, TN

TENNESSEE DEPARTMENT OF REVENUE INHERITANCE TAX

Howard Wayne Coggins
Representative of the Estate
(Not valid unless signed)

RETAIN PINK COPY FOR YOUR RECORDS. RETURN WHITE AND YELLOW COPIES TO THE TENNESSEE DEPARTMENT OF REVENUE, 500 DEADERICK ST., NASHVILLE, TN 37242.

DEPARTMENTAL USE ONLY

Amy Green
For Commissioner of Revenue
(By Tax Audit Manager - Audit Division)

JAN 20 2005
Date approved
Inheritance-Gift Tax Section

Anna G. Everton, Attorney
4525 Harding Rd., Ste. 323
P. O. Box 58084
Nashville, TN 37205-8084

Release will be mailed to address to the left. Type or print clearly in ink the complete address (include street number and zip code.) Address should be contained within the space provided.

RV-F1401501 (Rev. 6-00)

Ex. B
(Tract Two)

TENNESSEE DEPARTMENT OF REVENUE

INHERITANCE TAX RELEASE
FOR REAL OR PERSONAL PROPERTY

NOTICE: THIS DOCUMENT BECOMES AN OFFICIAL STATE RECORD WHEN COMPLETED. INFORMATION SHOULD BE TYPED OR PRINTED CLEARLY IN INK. COMPLETE A SEPARATE INHERITANCE TAX RELEASE FORM FOR EACH PARCEL OF REAL PROPERTY OR FOR EACH BANK OR CORPORATION.

NAME OF DECEDENT: EDITH CHRISTINE COGGINS

COUNTY OF RESIDENCE: DAVIDSON

SOCIAL SECURITY NUMBER: [redacted]-9882

RECEIVED 12 JAN 18 '05 TENNESSEE

APPLICATION:

ATTACHED: YES ✓ NO ___

ON FILE: YES ___ NO ___ IF SO DATE FILED ___

The Department of Revenue hereby waives the issuance of notice required by Section 67-8-417, Tennessee Code Annotated and consents to the transfer of the property now in your custody, or standing on your records in the name of the captioned decedent.

DESCRIPTION OF PROPERTY: (Davidson County Map-Parcel 82-9-180.00)
(List only one)

Land in Davidson County, Tennessee.

TENNESSEE DEPARTMENT OF REVENUE INHERITANCE TAX

Being the northerly 3.5 feet of the easterly part of Lot No. 57 and the southerly 29.4 feet on the easterly part of Lot No. 58 on the Plan of D.T. McGavock's First Addition of record in Book 10, page 606 to 609, inclusive, Register's Office for said County.

This is improved property known as 1327 4th Ave. N., Nashville, TN

Horace Wayne Coggins
Representative of the Estate
(Not valid unless signed)

RETAIN PINK COPY FOR YOUR RECORDS. RETURN WHITE AND YELLOW COPIES TO THE TENNESSEE DEPARTMENT OF REVENUE, 500 DEADERICK ST., NASHVILLE, TN 37242.

DEPARTMENTAL USE ONLY

Amy Green
For Commissioner of Revenue
(By Tax Audit Manager - Audit Division)

JAN 20 2005
Date approved
Inheritance-Gift Tax Section

Anna G. Everton, Attorney
4525 Harding Rd., Ste. 323
P. O. Box 58084
Nashville, TN 37205-8084

Release will be mailed to address to the left. Type or print clearly in ink the complete address (include street number and zip code.) Address should be contained within the space provided.

RV-F1401501 (Rev. 6-00)